'Why all of a sudden is my motor going a bit funny?' A multi-level narrative analysis technique to explore illness experience.

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Overview

1. My background and PhD project overview
2. The case
3. Analysis overview
4. Practical example
5. Benefits to approach
6. Drawbacks to approach
7. Questions

NHS

National Institute for
Health Research

Collaboration for Leadership in
Applied Health Research and Care
North Thames

Background

Methods

The Case - Sarah's story

Analysis – 3 techniques

Structural

Based on Labov and Waletsky's model for identifying clauses:

- Abstract
- Orientation
  Complicating action
- Evaluation
- Resolution
- Coda

Thematic

Based on Braun and Clarke's 6 stage model:

1. Familiarisation
2. Generating initial codes
3. Searching for themes
4. Reviewing themes
5. Defining and naming themes
6. Finalise themes and findings

Metaphorical

Lakoff and Johnson
A word or phrase was identified as a metaphor if:
The literal meaning stems from an area of sensoric or cultural experience (source/vehicle) transferred to second area (target)

Analysis – 3 techniques

Structural

Event narratives with one main speaker, not useful for small stories

If used alone fashion, can ignore the role of the listener

Useful for generating 'timeline' of overall story

Thematic

Often not clearly defined

Breaks the narrative into segments, can be hard to see the 'whole story' or temporal development of ideas

Gives breadth of coverage, but can lack depth

Metaphorical

Gives insight into social and subjective meanings in narrative talk – goes beyond taking language 'at face value'

Can exclude a lot of data (and even speakers) if only focussing on metaphorical language

Linking the techniques

- Many qualitative approaches utilise overlapping techniques

- Think of the three models as practical tools to help explore the data

- View at different levels of scale (whole narrative, to fine grained analysis)

- Consider the narrative 'threads' and the way the narrative is co-constructed in time and place

Using 3D approach – metaphorical lens

"I've been fine for 16 years, why all of a sudden is **my motor** going a bit funny really?"

"I felt like my heart was going to stop. My chest was, my heart was beating so fast that I actually thought, **it's going to just stop in a minute. It's just going to stop**."

"But you've got two kidneys, you've only got **one heart**."

Using 3D approach – Thematic lens

"Went to the toilet and suffered chest pains. **But I knew they were different. They wouldn't go away. It wasn't just on the left side it was all round my chest.** It made me very tearful and I wasn't sure what was happening. **I didn't want to call an ambulance or anything."**
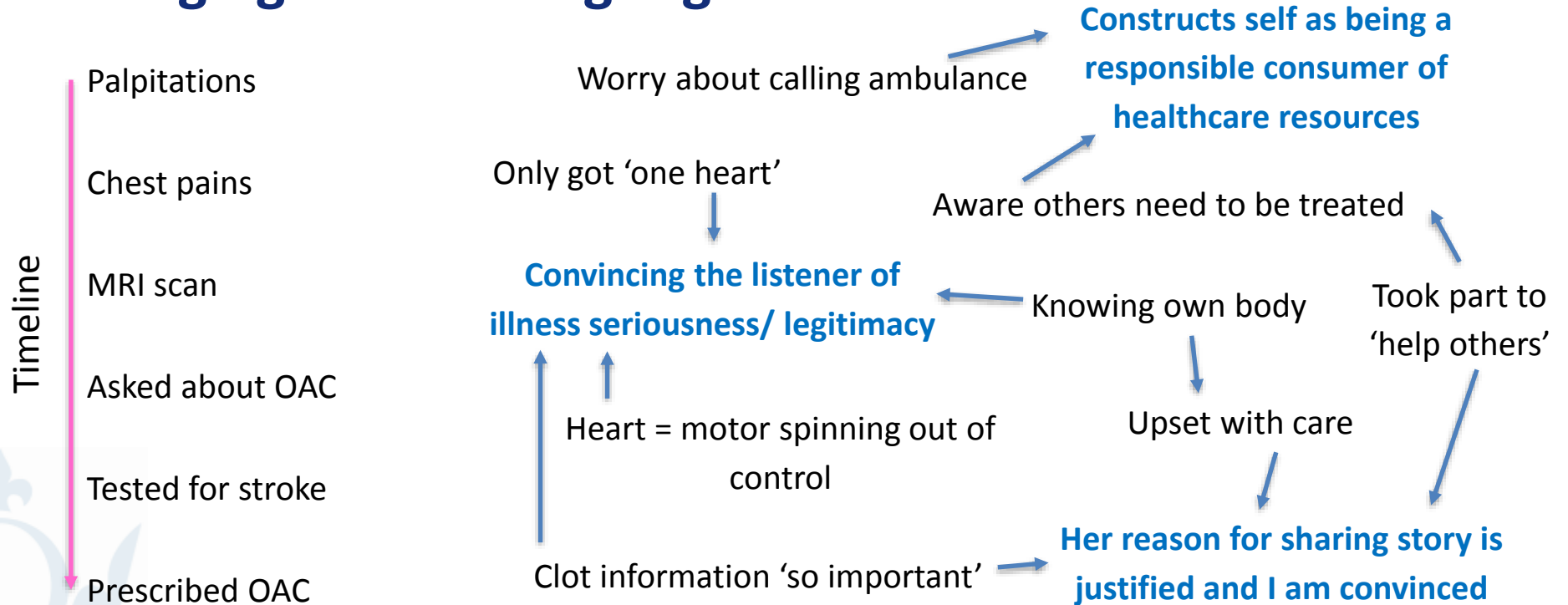
"You know you hear about people that think they're having a heart attack and they're told it's indigestion or something like that. So that was one of the things in my mind thinking, cor, **imagine an ambulance turning up**. And I end up, oh it's just either a few palpitations or something. **But then, I did know it was a different pain**."

Using 3D approach – Structural lens

"But there's one thing in hindsight as well that I sort of go back to which **upsets me a little bit**. The guy doing the MRI scan said to me after he'd done it, are you on blood thinners? And I said, no. But because I'd taken some aspirin weeks before I thought, oh is he referring to that? But now in hindsight I realise he'd seen the clot. But from seeing the clot it was six months until I went on blood thinners. And then I was tested to see if I'd had a stroke. So you kind of think **that information's so important**. If that had been dealt with at the time, I was lucky I didn't have a stroke, but I could have done. You're mind, you're thinking all the time, oh. **But obviously you're not the only person that's being seen**."

Bringing the thinking together

Timeline

- Palpitations
- Chest pains
- MRI scan
- Asked about OAC
- Tested for stroke
- Prescribed OAC

Worry about calling ambulance → **Constructs self as being a responsible consumer of healthcare resources**

Only got 'one heart'

Convincing the listener of illness seriousness/ legitimacy

Aware others need to be treated

Knowing own body

Took part to 'help others'

Heart = motor spinning out of control

Upset with care

Clot information 'so important'

Her reason for sharing story is justified and I am convinced

Positives so far

- Three different viewpoints from which to explore the data, see things you wouldn't see before

- Tension between lenses can be fruitful

- Combining approaches can help overcome the drawbacks of a singular approach

- Flexible use, moving back and forth, keeps it interesting!

- Three different levels of analytic scale: the whole told story, smaller segments from different moments within and between transcripts, fine grained analysis of phrases

Drawbacks

- Contradictions in the findings between techniques sometimes can be challenging

- Structural analysis has been critiqued and can be limiting, and therefore I wouldn't recommend using it alone

- Labov's model can be difficult to use in practice - it can be challenging to affix the correct clause 'type' to the data

- Can be time consuming

- Not useful if you are wedded to one qualitative approach

Any questions?

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